

DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Elect Angela Connolly for Supervisor

IMPORTANT: Indicate by # type of committee you are reporting for: 5(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other
Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political
Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

ANGELA CONNOLLY

Political Party (if applicable)

DEMOCRATIC

Office Sought

Rock County Supervisor

District (if Senate or House)

SIGNATURE OF PERSON FILING REPORT

515-778-7063
TELEPHONE

FORM DR-2 (Rev. 07/2004)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	
Logged In	
Scanned	
Computer	
Audited	

Late reports are subject to possible civil and criminal penalties.

 10/19/10
 2010 OCT 19 PM 3:14
 DATE SIGNED

I AM FILING A

10/19/10
(report date)

REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.

Indicate by # 1☐ CHECK IF AMENDMENT TO REPORT DATED _____☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$

69,971⁹⁰

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$

94,936⁹⁰

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

Schedule F: Loan Repayments total (Attach Schedule F)

21,556⁵⁹

CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)

\$

73,380³¹

**UNPAID BILLS (From Schedule D - Attach Schedule D)

\$

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$

30⁰⁰

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

YES ☒ NO1,042⁰³

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

SCHEDULE

A

(Rev. 07/03)

**MONETARY
RECEIPTS**

☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT ANGELA CANNOLLY FOR SUPERVISOR

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
9/7/2010	ID# CK# 1892	William & Kathleen Lillis 3000 Patricia Dr. Dm Ia 50322		\$ 750 ⁰⁰	<input type="checkbox"/>
9/7/2010	ID# CK# 944	Loree R. Miles TTEF 1402 Tulip Tree Ln Warr Ia 52266-6665		250 ⁰⁰	<input type="checkbox"/>
9/7/2010	ID# CK# 7397	Kurt & Lynette Rasmussen 6846 NW Beaver Dr Johnston, Ia 50131		750 ⁰⁰	<input checked="" type="checkbox"/>
9/7/2010	ID# CK# 3334	William C Krupp II + Nancy 5221 NW 70th Pl. Johnston, Ia 50131		500 ⁰⁰	<input type="checkbox"/>
9/7/2010	ID# CK# 1185	Gerald & Maylen Reupert 2410 Park Ave Am Ia 50321		500 ⁰⁰	<input type="checkbox"/>
9/7/2010	ID# CK# 6400	William C Krupp Sub 200 4949 Westown Pkwy WDM 52266		500 ⁰⁰	<input checked="" type="checkbox"/>
9/7/2010	ID# CK# 3524	But Kennedy 8714 Primrose Lane Clive, Ia		25 ⁰⁰	<input checked="" type="checkbox"/>
9/7/2010	ID# CK# 12003	Robert Rice 12207 Ridgemont Dr. Urbandale, Ia 50323		25 ⁰⁰	<input checked="" type="checkbox"/>
9/7/2010	ID# CK# 4280	Duane & Rhonda Burkhardt 3797 120th Ave Carlisle, Iowa 50047		1500 ⁰⁰	<input checked="" type="checkbox"/>
9/8/2010 9/2/2010	ID# 6248 CK# 1155	AFSCME LOCAL 1868 111 COURT AU ROOM 00 DES MOINES IA 50319		500 ⁰⁰	<input type="checkbox"/>

SUB-TOTAL

\$ 5,300

TOTAL (if last page of this schedule)

\$

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Page 1 of 15
(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT ANGELA CONNOLLY Fed S Rep Iowa

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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8/28/2010	ID# CK# 1065	Frank Marasco 507 E Locust St. Unit 203 Des Moines IA 50309		\$ 100.00	<input checked="" type="checkbox"/>
8/28/2010	ID# CK# 2395	Gail Stevenson 2936 E Tyburn Ave Des Moines IA 50317		25.00	<input checked="" type="checkbox"/>
8/28/2010	ID# CK# 5587	Peter or Maria Marasco 3214 Nash Ave Des Moines IA 50310		25.00	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
9/18/2010	ID# CK# 9519	James Audrey Sally Peterson 3207 Woodland Ave. Des Moines IA 50312		100.00	<input checked="" type="checkbox"/>
9/18/2010	ID# CK# 3084	William Jensen 8830 Meredith Urbandale, IA 50322		50.00	<input checked="" type="checkbox"/>
9/18/2010	ID# CK# 200.00	James D. Gauger P.O. Box 4019 Ankeny IA 50021		200.00	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 500.00
\$

TOTAL (if last page of this schedule)

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Page 2 of 15
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT ANGELA CONNELLY FOR SUPERVISOR

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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9/13/2010	ID# CK# 1351	Laborers Local 177 2121 Delaware Ave. DM IA 50317		\$ 2,500 ⁰⁰	<input checked="" type="checkbox"/>
9/13/2010	ID# CK# 9560	Lee + Ann Duin 209 SE Uehlamor Dr. Ankeny Iowa 50021		50 ⁰⁰	<input checked="" type="checkbox"/>
9/13/2010	ID# CK# 2861	Michael G. Gartner 100 Market St. Unit 515 DM IA 50309		50 ⁰⁰	<input type="checkbox"/>
9/13/2010	ID# Pac 6248 CK# 1158	Afscme Local 608 AFLCIO 111 Court Ave Rm 100 DM IA 50310		250	<input checked="" type="checkbox"/>
9/20/2010	ID# CK# 3476	David Debolt 6926 NE Halbrook Lane Ankeny IA 50023		100 ⁰⁰	<input checked="" type="checkbox"/>
9/20/2010	ID# CK# 1292	Tony Bisignaro 268 E Leach Ave DM IA 50310		100 ⁰⁰	<input checked="" type="checkbox"/>
9/20/2010	ID# CK# 1331	Marie Grabenbauer 2655 Aurora Ave DM IA 50310		200 ⁰⁰	<input checked="" type="checkbox"/>
9/20/2010	ID# CK# 10469	Bobb McClintock 469 41st DM IA 50312		100 ⁰⁰	<input checked="" type="checkbox"/>
9/20/2010	ID# CK# 15640	Bobb + David Hurd 300 Walnut St. Unit 163 DM IA 50309		500 ⁰⁰	<input checked="" type="checkbox"/>
9/20/2010	ID# CK# 7962	Fred Hubbell + Charles He 2300 Terrace Rd DM IA 50312		50 ⁰⁰	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 4800 ⁰⁰	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT NIGOLA SULLIVAN FOR SENATOR

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
9/24/2010	ID# 15234 CK# 9716 2252	IBEW 347 PAC FUND 9716 850 18th St. DM Ia 50314		\$ 500 ⁰⁰	<input checked="" type="checkbox"/>
9/24/2010	ID# CK# 35100	Michael - Jennifer Callaway 3516 18th St Dubuque Ia 52003		250 ⁰⁰	<input type="checkbox"/>
9/24/2010	ID# CK# 2852	Tom - Patty Boen 4510 DVID Ave DM Ia 50310		250 ⁰⁰	<input checked="" type="checkbox"/>
9/24/2010	ID# CK# 2789	Tim Cook 5585 Schweiker Dr Pleasant Hill 50327		50 ⁰⁰	<input checked="" type="checkbox"/>
9/24/2010	ID# CK# 10168	Quentin R Boyken 821 58th St Wom, Ia 50266		100 ⁰⁰	<input checked="" type="checkbox"/>
9/24/2010	ID# CK# 4182	John Hale 2105 NE Delaware Ave Ankeny Ia 50021		300 ⁰⁰	<input checked="" type="checkbox"/>
9/24/2010	ID# CK# 1257	Clark - Trish Sullivan 4518 Douglas DM Ia 50310		250 ⁰⁰	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 1900⁰⁰

TOTAL (if last page of this schedule)

\$

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Page 4 of 15
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT ANGELO RODOLFO FOR SENATOR

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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9/25/2010	ID# CK# 4638	Ed Skinner Box 367 Albion, Ia 50009		\$ 75 ⁰⁰	<input checked="" type="checkbox"/>
9/25/2010	ID# CK# 7170	James S. Cowrie 141 37th St Des Moines IA		\$ 50 ⁰⁰	<input checked="" type="checkbox"/>
9/25/2010	ID# CK# 5344	Connie Wimer 100 4th St. Omaha IA 55309		\$ 25 ⁰⁰	<input checked="" type="checkbox"/>
9/27/2010	ID# CK# 6445	Karla + Joseph Aiello 3700 Wadcott Ave Omaha IA 55321		\$ 100 ⁰⁰	<input checked="" type="checkbox"/>
9/27/2010	ID# CK# 10698	Frank + Joyce Cataldo Jr. 3915 Wadkonda Dr Omaha IA 55321		\$ 5 ⁰⁰	<input type="checkbox"/>
9/27/2010	ID# CK# 5024	John Tyler 317 E Marion Omaha 55315		\$ 50 ⁰⁰	<input checked="" type="checkbox"/>
9/27/2010	ID# CK# 12907	Richard Hutchins 6896 158th Ave Indianola, Ia 50125		\$ 25 ⁰⁰	<input type="checkbox"/>
9/28/2010	ID# CK# 4310	Donald + Cheryl Timmins 8409 NE 54th Albion, Ia 50009		\$ 100 ⁰⁰	<input checked="" type="checkbox"/>
9/28/2010	ID# CK# 4393	Rolland W. Nelson + Mary A. Nelson 2198 NE 180th Pl Clarks Summit IA 50325		\$ 25 ⁰⁰	<input checked="" type="checkbox"/>
9/28/2010	ID# CK# 6543	Harry Bookey + Pam Bess Bookey 400 Locust St Omaha IA 55310		\$ 100 ⁰⁰	<input checked="" type="checkbox"/>

SUB-TOTAL

\$ 2,125⁰⁰

TOTAL (if last page of this schedule)

\$

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Page 5 of 15
(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT ANGELA CONNELLEY FOR SENATOR

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9/30/2010	ID# CK# 3466	Scott Herman 7858 Boulder Ct Warr + 50246		\$ 25 ⁰⁰	<input checked="" type="checkbox"/>
	ID# CK# 8065	Maria Dolores Evans 1230 10th Ave NW Altoona Ia 50009		25 ⁰⁰	<input checked="" type="checkbox"/>
	ID# CK# 5081	Val Mason 12971 NE 14th Allerton, Ia 50007		50 ⁰⁰	<input checked="" type="checkbox"/>
	ID# CK# 12372	John & Mary Kay LaBarr 4210 Amick Om 50310		100 ⁰⁰	<input checked="" type="checkbox"/>
	ID# CK# 3388	Steven Michelle Mamo 3224 Summit Vista Om Ia 50321		25 ⁰⁰	<input checked="" type="checkbox"/>
	ID# CK# 7342	Kevin & Mary Ann Sullivan 12806 Lincoln Ave Om 50325		100 ⁰⁰	<input checked="" type="checkbox"/>
	ID# CK# 6407	Rich Eyckner PO Box 1797 DM Ia 50305		100 ⁰⁰	<input checked="" type="checkbox"/>
	ID# CK# 7116	Chris & Krista Viere 2814 NW 3rd St Ia 50023		25 ⁰⁰	<input checked="" type="checkbox"/>
	ID# CK# 1533	Nate & Mary Clare Cox 4707 Tubron Dr Om Ia 50310		50 ⁰⁰	<input checked="" type="checkbox"/>
	ID# CK#				<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 500 ⁰⁰	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee To Elect Angela Combs For Supervisor

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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9/30/2010	ID# tickets CK# cash	Christine Pudeo 4321 University Ave DM IA 50310		\$ 100.00	<input checked="" type="checkbox"/>
9/30/2010	ID# CK# cash	Brian Cooney 2808 48th St DM 50310		85.00	<input checked="" type="checkbox"/>
9/30/2010	ID# CK# cash	Jim Malony 3940 River Oak Dr. DM IA 50312		50.00	<input checked="" type="checkbox"/>
9/30/2010	ID# CK# cash	Alan McConeghy 4210 92nd Ct Urbandale 50322		50.00	<input checked="" type="checkbox"/>
9/30/2010	ID# CK# cash	Joshua Olson 2304 Park Ave. Emmetsburg Iowa 50501		100.00	<input checked="" type="checkbox"/>
9/30/2010	ID# CK# cash	Michael Klomgren 6004 SW Timberview Dr Emmetsburg 50501		50.00	<input checked="" type="checkbox"/>
9/30/2010	ID# CK# 3135	John Tyler 3123 SW 3rd St DM 50315		40.00	<input checked="" type="checkbox"/>
9/30/2010	ID# CK# 654	Florence O'Bohr 4127 30th St DM IA 50310		25.00	<input checked="" type="checkbox"/>
9/30/2010	ID# CK# 1068	Mark Spina 2545 E Ohio Ave DM 50317		50.00	<input checked="" type="checkbox"/>
9/30/2010	ID# CK# 13741	Jack & Theresa McDevitt 1723 Mar-Ella Trail DM IA 50310		25.00	<input checked="" type="checkbox"/>

SUB-TOTAL

TOTAL (if last page of this schedule)

\$ 565
\$

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Page 7 of 15
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT ALBA COMPTON FOR SENATOR

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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9/30/2010	ID# CK# 5375	John E. Lundstrom 3708 SW Goodwin St. Ankeny, Iowa 50023-8829		\$ 75 ⁰⁰	<input checked="" type="checkbox"/>
9/30/2010	ID# CK# 7406	Robert & Sharon Holz 1311 Country Club Blvd. Clive, IA 50325		100 ⁰⁰	<input checked="" type="checkbox"/>
9/30/2010	ID# CK# 7685	Tom Flynn 2000 Financial Center Des Moines IA 50309		100 ⁰⁰	<input checked="" type="checkbox"/>
9/30/2010	ID# CK# 3561	Bonnie Campbell 3131 Flynn Dr. Unit 702 Des Moines IA 50321		250 ⁰⁰	<input checked="" type="checkbox"/>
9/30/2010	ID# CK# 5038	Beth Buch 521 SE Aster Ct. Ankeny, IA 50021		25 ⁰⁰	<input type="checkbox"/>
9/30/2010	ID# CK# 5037	Beth Buch 521 SE Aster Ct. Ankeny, IA 50021		150 ⁰⁰	<input type="checkbox"/>
9/30/2010	ID# CK# 6525	Alec Quijano 322 SE Hart Ave Des Moines IA 50315		25 ⁰⁰	<input type="checkbox"/>
9/30/2010	ID# CK# 4874	Jon Smith 3521 Beaver Des Moines IA 50310		25 ⁰⁰	<input checked="" type="checkbox"/>
9/30/2010	ID# CK# 9544	Roscoe Riemen Schrieder 2120 47th Des Moines IA 50310		25 ⁰⁰	<input checked="" type="checkbox"/>
9/30/2010	ID# CK# 5276	Garry W. Eloshen 12682 Sunset Ter. Clive, IA 50325		25 ⁰⁰	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 800 ⁰⁰	
TOTAL (if last page of this schedule)				\$	

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Page 8 of 15
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTS

☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT ANNE LACOMODLY FOR SUPERVISOR

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
9/30/2010	ID# CK# 5312	Pete Karney 1235 43rd DM Ia 50311		\$ 25.00	<input checked="" type="checkbox"/>
9/30/2010	ID# CK# 6998	Cheryl & Patricia Sullivan 4208 Amick DM Ia 50310		25.00	<input checked="" type="checkbox"/>
9/30/2010	ID# CK# 4234	Jim & Sheila Hurligan 5412 Rittgers St. Johnston Ia 50131		100.00	<input checked="" type="checkbox"/>
" "	ID# CK# 8001	Sheik Lumley 1313 SE Universal #208 Waukee Ia 50263		25.00	<input checked="" type="checkbox"/>
" "	ID# CK# 3539	Lynna Linda Ferrell 7409 Maple Dr. Urbandale, Ia 50322		25.00	<input checked="" type="checkbox"/>
" "	ID# CK# 3295	Pamela E. Corner 2715 E. 40th St DM 50317		25.00	<input checked="" type="checkbox"/>
" "	ID# CK# 1008	Ron & Stisen Osby 155 16 Okwood Dr Urbandale 50323		25.00	<input checked="" type="checkbox"/>
" "	ID# CK# 16351	Connie Cook 4039 Quind DM 50310		50.00	<input checked="" type="checkbox"/>
" "	ID# CK# 2972	Shannon Cofield 936 37th St DM 50312		50.00	<input checked="" type="checkbox"/>
" "	ID# CK# 9358	Pat McManus 1449 NW 122nd St Clive Ia		100.00 8	<input checked="" type="checkbox"/>

SUB-TOTAL

\$ 675

TOTAL (if last page of this schedule)

\$

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Page 9 of 15
(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee To Elect Angela Conolly For Governor

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
9/30/2010	ID# CK# 2547	David Williamson 1595 SE 82nd St Bunnells, Ia 52037		\$ 250.00	<input checked="" type="checkbox"/>
	ID# CK# 10662	Ed Skinner P.O. Box 367 Albion, Ia 52009		\$ 50.00	<input checked="" type="checkbox"/>
	ID# CK# 2001	Melissa Watson 4312 King Blvd Omaha, Ia 52031		\$ 250.00	<input checked="" type="checkbox"/>
	ID# CK# 3043	Rosemary Moody 5285 E Parkway Dr Pleasant Hill, Ia 52327		\$ 100.00	<input checked="" type="checkbox"/>
	ID# CK# 4785	Marj Spino 2545 E Dubs Ave Omaha, Ia 52310		\$ 50.00	<input checked="" type="checkbox"/>
	ID# CK# 4719	R. Daveney 608 Leach Ave Omaha, Ia 52315		\$ 50.00	<input checked="" type="checkbox"/>
	ID# CK# 5529	Al Tunks 2601 E 39th St Omaha, Ia 52317		\$ 50.00	<input checked="" type="checkbox"/>
	ID# CK# 6428	B.E Rice 821 E Miller Ave Omaha, Ia 52315		\$ 100.00	<input type="checkbox"/>
	ID# CK# 09951	Roy Blase 913 NE 3rd St Ankeny, Ia 50021		\$ 50.00	<input type="checkbox"/>
	ID# CK# 7033	Kathy Hume 14146 Pinnacle Pt. Dr. Clive, Ia 52025		\$ 500.00	<input type="checkbox"/>
SUB-TOTAL				\$ 2100.00	
TOTAL (if last page of this schedule)				\$ 1875.00	

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For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT AUGELACANDOLLY FOR SUPERVISOR

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
9/30/2010	ID# CK# 1434	Phil Wise 5397 Meredith Dr SE Om 50310		\$ 3.00	<input checked="" type="checkbox"/>
11/1	ID# CK# 3250	Brian Patterson Joret Petersen 9302 Bowen Hills Dr SE Om 50310		10.00	<input checked="" type="checkbox"/>
11/1	ID# CK# 1086	Bradford Miller 419 42nd St Om 50312		25.00	<input checked="" type="checkbox"/>
11/4	ID# CK# 2134	Carl & Susan Vass 323 E 5th St Om Ia 50309		250.00	<input checked="" type="checkbox"/>
11/1	ID# CK# 1872	Bryan & Ann Whitley 1412 38th Pl Om Ia 50312		250.00	<input checked="" type="checkbox"/>
11/1	ID# CK# 1241	Diana Deiber 1288 13981 S. Shore Dr Clive Ia 50325		30.00	<input checked="" type="checkbox"/>
11/11	ID# CK# 1542	Nate & Mary Clare Cox 4707 Turner Dr Om 50310		50.00	<input checked="" type="checkbox"/>
11/11	ID# CK# 1351	Franny Medeiros 3019 36th St Om Ia 50310		50.00	<input checked="" type="checkbox"/>
11/4	ID# CK# 6138	Terri Teach Hendricks 521 22nd Ave SW Altoona Ia 50009		25.00	<input checked="" type="checkbox"/>
11/1	ID# CK# 5777	Beth C Dooley 3948 36th St Om Ia 50310		25.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 830	
TOTAL (if last page of this schedule)				\$	

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Page 11 of 15
(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT ANGELA CONNOLLY FOR GOVERNOR

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YYR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
9/30/2010	ID# CK# 1664	Marty Ryan 2516 Lynner Dr DM IA 50310		\$ 20.00	<input checked="" type="checkbox"/>
"	ID# CK# 5175	John Caccatore 1700 Casady Dr DM IA 50315		50.00	<input checked="" type="checkbox"/>
"	ID# CK# 2288	Jack & Becky Blackford 9500 Twin Eagles Dr Johnston IA 50131		50.00	<input checked="" type="checkbox"/>
"	ID# CK# 17811	Greg & Pat Lynch 4422 Brinkwood Rd. DM IA 50310		100.00	<input checked="" type="checkbox"/>
"	ID# CK# 17812	Greg & Pat Lynch 4422 Brinkwood Rd DM IA 50310		25.00	<input checked="" type="checkbox"/>
"	ID# CK# 164	Thomas LaPointe 5597 Meredith Dr Unit B DM IA 50310		100.00	<input checked="" type="checkbox"/>
"	ID# CK# 1126	Alex Lynch 4422 Brinkwood Rd DM IA 50310		25.00	<input checked="" type="checkbox"/>
"	ID# CK# 1240	Matt Fitzgerald 4740 70th Pl Urbandale IA 50322		100.00	<input checked="" type="checkbox"/>
"	ID# CK# 2286	Robert Parker 3201 Bel Aire Rd DM IA 50310		50.00	<input checked="" type="checkbox"/>
"	ID# CK# 11679	Mary Maloney 3415 W. Timber Pkwy DM IA 50310		25.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 545	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT ANGELA COMBLY FOR SENATOR

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
9/30/2010	ID# CK# 2372	Polle Bredeson 5904 Crown Lane DM IA 5		\$ 25 ⁰⁰	<input checked="" type="checkbox"/>
" "	ID# CK# 5430	Jamie Fitzgerald 3036 E Diehl DM IA 50320		100 ⁰⁰	<input checked="" type="checkbox"/>
" "	ID# CK# 5422	May Ann Hilger Bretke 3121 44th DM IA 50310		40 ⁰⁰	<input checked="" type="checkbox"/>
" "	ID# CK# 7428	Kim Hansen 4015 Woodland Ave DM IA 50312		25 ⁰⁰	<input checked="" type="checkbox"/>
" "	ID# CK# 4801	John Raven 1414 8th Ave SE Altoona, Ia 50009		50 ⁰⁰	<input checked="" type="checkbox"/>
" "	ID# CK# 3083	Tom Henderson 6239 NW Winwood Dr Johnston IA 50131		100 ⁰⁰	<input checked="" type="checkbox"/>
" "	ID# CK# 4122	Mike Hall 4160 SE 9th St Rumells, Ia 50237		25 ⁰⁰	<input checked="" type="checkbox"/>
" "	ID# CK# 3889	Larry Land 6048 Terrace Dr Johnston IA 50131		50 ⁰⁰	<input checked="" type="checkbox"/>
" "	ID# CK# 8795	Bill McCarthy 5201 SE 32nd St DM IA 50320		150 ⁰⁰	<input checked="" type="checkbox"/>
" "	ID# CK# 3612	Don & Virginia Rowen 3407 Crocker St DM IA 50312		25 ⁰⁰	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 590 ⁰⁰	
TOTAL (if last page of this schedule)				\$ 590 ⁰⁰	

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For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

SCHEDULE

A

(Rev. 07/03)

**MONETARY
RECEIPTS**

☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Elect Angus A. Conditlyed Schenck

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
9/28/2010	ID# 6139 CK# 2391	United Steel Workers America 125 NW Broadway Om 52313		\$ 250 ⁰⁰	<input type="checkbox"/>
9/28/2010	ID# CK# 4373	Rolph Marasco Jr. 2401 Ennis Ave Om Ia 52310		100 ⁰⁰	<input type="checkbox"/>
9/28/2010	ID# CK# 4046	Michael H. Smith 2015 Nash Dr. Om Ia 52314		500 ⁰⁰	<input checked="" type="checkbox"/>
9/28/2010	ID# CK# CASH	Kevin & Maria Brownell 843 27th WDM Ia 52265		100 ⁰⁰	<input type="checkbox"/>
9/30/2010	ID# CK# 2544	Nolan Gert 1517 Pleasantview Dr. Om Ia 50315		250 ⁰⁰	<input checked="" type="checkbox"/>
9/30/2010	ID# CK# 2619	Joe Brick 13120 Cedarwood Clive, Ia 50325		250 ⁰⁰	<input type="checkbox"/>
9/30/2010	ID# 6334 CK# 1310	Plumbers & Steamfitters 2501 Bell Ave. Om Ia 50321	local 33	800 ⁰⁰	<input type="checkbox"/>
9/30/2010	ID# CK# CASH	TED + CONNIE BOESON 3041 DON LEE CT DES MOINES IA 50317		200 ⁰⁰	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 2150

TOTAL (if last page of this schedule)

\$

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Page 14 of 15
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT ANGELA CANNOLY FOR SENATOR

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10/5/2010	ID# CK# cash	Laura Sands 2922 37th ST. DES MOINES IA 50310		\$ 25.00	<input checked="" type="checkbox"/>
10/5/2010	ID# CK# 2569	John Sachs Janice Von Arb 5028 70th ST Urbandale Ia 50022		25.00	<input checked="" type="checkbox"/>
10/5/2010	ID# CK# 1556	Michael Kasper 2106 40th St. DM Ia 50310		150.00	<input checked="" type="checkbox"/>
10/5/2010	ID# CK# 1737	Dennis Groenenboom 1134 38th St DM Ia 50311		25.00	<input checked="" type="checkbox"/>
10/6/2010	ID# CK# 17331 3291	Central Ia Buldiz Trade P.O. Box 7310 DM Ia 50309		100.00	<input type="checkbox"/>
10/9/2010	ID# CK# 5961	Robert G. Liley Jr. 3121 Bern Ave DM Ia 50317		100.00	<input type="checkbox"/>
10/7/2010	ID# CK# 3428	Michael Sternbach 818 NW Greenwood Arl Ia 50023		100.00	<input checked="" type="checkbox"/>
10/7/2010	ID# CK# 1239	Randy Steinbock 8838 NE 94th Ave Bardonia, Ia 50035		100.00	<input checked="" type="checkbox"/>
10/7/2010	ID# CK# 6011	Heather Soener 2013 69th St Windsor Heights, Ia 50324		25.00	<input checked="" type="checkbox"/>
10/11/2010	ID# CK# 6019 691	CWA Local 7102 3612 SW 9th St DM Ia 50315		20.00	<input type="checkbox"/>

SUB-TOTAL

\$ 175.00
\$ 249.65

TOTAL (if last page of this schedule)

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Page 15 of 15
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT ANGELA CANNOLLY FOR SUPERVISOR

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
7/25/10	ID# CK# 1210	VERIZON WIRELESS PO BOX 553 WARRENDALE PA 15076-2553	CELL PHONE	\$ 161.95
7/8/10	ID# CK# N/A	BANKERS TRUST 453 7th DES MOINES IA 50321	BANK FEE	3.85
8/3/10	ID# CK# 1211	STAPLES 3800 MEDLEY WAY DES MOINES IA 50310	CALENDARS	47.68
8/9/10	ID# CK# 1212	BEAVERDALE FALL FESTIVAL PO BOX 3000 Y DES MOINES IA 50311	BOOTH	500.00
8/17/10	ID# CK# 1213	APPLE STORE 101 S 74th WEST DES MOINES IA 50319	COMPUTER + CONNECT.	1042.03
8/21/10	ID# CK# 1215	VERIZON WIRELESS PO BOX 553 WARRENDALE PA 15076-2553	CELL PHONE	166.26
8/25/10	ID# CK# 1216	POLK COUNTY DEMOCRATS. PARTY 5661 FLEUR DR DES MOINES IA 50309	CONTRIBUTION	100.00
8/21/10	ID# CK# 1217	WINDING CREEK GRAPHIC 2852 CONNECTICUT AVE NW WASHINGTON DC 20008	CALLING PROGRAMS	1000.00
SUB-TOTAL				\$ 3,021.72
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 1 of 5

(for Schedule B)

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT ANGELA CANDIDY FOR SUPERVISOR

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
8/25/10	ID# CK# 1218	BASIL BLUE 4844 NW 68th PL JOHNSON IA 50131	LAYOUT FOR NEW LOGO	\$ 543 ²⁵
8/27/10	ID# CK# 1219	POLK COUNTY DEMOCRATIC PARTY 5661 FLEUR DR DES MOINES IA 50319	PARTY CONTRIBUTION	500 ⁰⁰
8/27/10	ID# CK# 1220	MATT FITZGERALD 4740 70th PL URBAN DALE IA 50322	CAMPAIGN CONSULTING	200 ⁰⁰
8/28/10	ID# CK# 1221	CARTER PRINTING 1739 E GRAND DES MOINES IA 50316	TICKETS DOOR MAGNETS	194 ⁴⁰
8/6/10	ID# CK# NA	BANKERS TRUST 453 7th DES MOINES IA 50319	BANK FEES	9 ²⁸
9/9/10	ID# CK# 1222	UNITED STATES POSTAL SERVICE DES MOINES MAIN POST OFFICE DES MOINES IA 50318	MAIL FEE DEPOSIT	400 ⁰⁰
9/16/10	ID# CK# 1223	SAMS CLUB 1101 73rd WINDSOR HEIGHTS IA 50311	MEMBERSHIP FEES	40 ⁰⁰
9/16/10	ID# CK# 1224	SAMS CLUB 1101 73rd WINDSOR HEIGHTS IA 50311	CANDY FOR BEAUPRAIRIE PARADE	217 ²²
SUB-TOTAL				\$ 3,905 ²²
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT ANGELA CONNOLLY FOR SENATOR

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9/15/10	ID# CK# 1225	CADILLAC IDENTICAL 1739 E GRAND DES MOINES IA 50316	POSTCARDS	\$ 1070 ⁰⁰
9/15/10	ID# CK# 2061	VERIZON WIRELESS PO BOX 553 WARRICK IA 50605	CELL PHONE	153 ²⁴
9/15/10	ID# CK# 2062	IOWA DEMOCRATIC PARTY 5661 FLUKE DES MOINES IA 50319	PARTY CONTRIBUTION	3000 ⁰⁰
9/15/10	ID# CK# 2063	NOBLES 9999 UNIVERSITY BLVD CLIVE IA 50325	SUPPLIES FOR PARADE	80 ¹⁵
9/15/10	ID# CK# 2064	ACE HARDWARE 5715 HICKMAN RD DES MOINES IA 50310	STAKES	72 ²²
9/16/10	ID# CK# 2065	SAMS CLUB 1101 73RD WINDSOR HEIGHTS IA 50311	PARADE CANDY	141 ⁴³
9/20/10	ID# CK# 2066	POLK COUNTY TREASURER 100 E COURT DES MOINES IA 50309	RENTAL D.W. SENIOR CENTER (DEPOSIT)	100 ⁰⁰
9/20/10	ID# CK# 2067	POLK COUNTY TREASURER 100 E COURT DES MOINES IA 50309	RENTAL D.W. SENIOR CENTER ADDITIONAL	135 ⁰⁰
50309 SUB-TOTAL				\$ 4,752 ⁶⁴
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE

B

(Rev. 07/03)

MONETARY
EXPENDITURES☐ CHECK THIS BOX IF
AMENDING FORM

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT ARA CANNLEY TO SENATOR

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9/24/10	ID# CK# 2068	CARTER ID# 1739 GRAND AD DES MOINES IA 50316	MAIL PIECE	\$ 744.14
9/24/10	ID# CK# 2069	UNITED STATES POSTAL SERVICE BEAVERDALE STATION DES MOINES IA 50310	STAMP	88.00
9/26/10	ID# CK# 2070	20510 7205 MILL CREEK WEST DES MOINES, IA 50322	FOOD/SUPPLIES FUNDRAISER	63.20
9/30/10	ID# CK# 2071	SAM'S CLUB 1101 73RD ST WINDSOR HEIGHTS, IA 50311	FOOD/SUPPLIES FUNDRAISER	110.49
9/8/10	ID# CK# NA	BANKERS TRUST 453 7TH DES MOINES IA 50309	BANK FEES	182
9/30/10	ID# CK# 2072	WALMART 1601 73RD ST DES MOINES IA 50310	FOOD/SUPPLIES FUNDRAISER	43.42
9/30/10	ID# CK# 2073	WINONA CREDIT CO 2852 CONNECTICUT AVE NW WASHINGTON DC 20008	CALL LISTS	220.08
9/30/10	ID# CK# 2074	CARTER PRINTING 1739 GRAND AD DES MOINES IA 50316	YARD SIGNS	2382.88
SUB-TOTAL				\$ 3,655.47
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/1/10	ID# CK# 2075	MATT FITZGERALD 4700 70th PL URBANDALE IA 50322	CAMPAIGN	\$ 2000 ⁰⁰
10/1/10	ID# CK# 2074	FLORIAN S 1901 BETHER AVE DES MOINES IA 50310	LUNCH STADIUM	55 ⁰¹
10/7/10	ID# CK# 2077	IOWA DEMOCRATIC PARTY 5661 CLEAR DR DES MOINES IA 50319	CAMPAIGN	3000 ⁰⁰
10/7/10	ID# CK# 2076	URBANDALE IA 50322	CAMPAIGN	4712 ⁵⁰
10/11/10	ID# CK# 2079	CARTER PRINTING 1739 GRAND AVE DES MOINES IA 50315	SLUG	217 ⁶²
10/11/10	ID# CK# 2080	CAFE DE SCALA 644 18th ST DES MOINES IA 50314	FOOD	225 ¹⁴
10/11/11	ID# CK# 2081	TOM CONNOLLY 4707 N.W. Beaver DES MOINES IA 50310	FOOD/SUPPLIES	127 ⁹²
10/11/11	ID# CK# 2082	HOME DEPOT 10450 PLUM URBANDALE IA 50322	POSTS FOR SLUG	124 ⁵⁴
SUB-TOTAL				\$ 6,221 ⁵¹
TOTAL (if last page of this schedule)				\$ 2,556 ⁵⁹

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 5 of 5

(for Schedule B)

COMMITTEES TO ELECT ALBERTA COUNCIL

For School

ATTACH SCHEDULE H TO EACH REPORT, MAKING CHANGES AS REQUIRED

PART I - ONGOING INVENTORY OF CAMPAIGN PROPERTY

PART II - SALES OR TRANSFERS OF CAMPAIGN PROPERTY **

Date Purchased (Schedule B) or Date Received (Schedule E) (MM/DD/YR)	Description of Property	Purchase Price or Est. Value When Acquired*	Current Value at Fair Market This Report
08/17/2010	APPLE COMPUTER	1,042.03	1,042.03

[illegible]

TOTAL VALUE CAMPAIGN PROPERTY THIS REPORT
(TRANSFER TO SUMMARY PAGE) \$ 1642.03

**** PROPERTY SALES & TRANSFERS TOTAL**
(TRANSFER TO SUMMARY PAGE) \$ _____

* If estimated, show *est.* beside figure

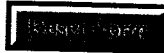
(Attach Additional Schedules if Needed)

Page 1 of 1 Pages
(For Schedule H)

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
	<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)
COMMITTEE TO ELECT ANGELA CONNELLY FOR SENATE



DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
09/29/200	AT SLME / IOWA COUNCIL 4320 NW 24th Ave DES MOINES, IA 50313	N/A	USE OF COUNCIL PLANS	\$ 30.00	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 30.00	
TOTAL (if last page of this schedule)				\$ 30.00	

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.